Long case assessment marking criteria

The following key components are what examiners look for during the long case assessment:

**History taking**
- Presenting complaint.
- Pain history, incident/condition history.
- Pain cognitions.
- Pain impact on mood, physical function, social interaction.
- General history.
- Systemic enquiry.
- Pertinent negative history.
- Psychological history/stressors (past and present).
- Social history (developmental history, significant life events).
- Drug and alcohol history.
- Interview/communication skills.

**Examination**
- Relevant specific systemic physical examination including sensory examination.
- Clinical signs present elicited.
- Expanded general examination.
- Risk of infection awareness.
- Respect of patient.

**Formulation**
- Opening statement.
- Summary of history, examination, investigations.
- Interpretation.
- Differential diagnosis.
- Mental status findings.
- Pain cognitions identified.
- Diagnostic formulation with predisposing/precipitating/perpetuating/contributory factors.
  and impact of illness on individual/family/community.

**Management**
- Holistic and patient specific management plan.
- Further investigations/prognosis.
- Anticipation of potential issues, including barriers to treatment.

**Viva**
- Direct questioning related to case.
- Discussion of relevant clinical issues unexplored by candidate.
- Discussion around future scenarios/prognosis.
- Discussion of recent evidence relevant to case.